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**FACSIMILE COVER SHEET**

**TO:** Examiner Kristie Shingles  
Group Art Unit 2441

**FROM:** Michael K. O'Neill

**RE:** U.S. Application No. 09/498,396  
Atty. Docket No.: 03650.000140

**FAX NO.:** (571) 273-8300

**DATE:** March 17, 2009 **NO. OF PAGES:** 20  
(including cover page)

**TIME:** 3:25 **SENT BY:** Sharm

**MESSAGE**

Attached is an Amendment And Statement Summarizing Interview in response to the Office Action dated December 24, 2008.

I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office on:

March 17, 2009  
(Date of Deposit)

Michael K. O'Neill, Reg. No. 32,622  
(Name of Attorney for Applicant)

  
Signature

March 17, 2009  
Date of Signature

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In re Application of:

Docket No. 03650.000140

SAEED ANOOSHFAR

Application No.: 09/498,396

Examiner: K. Shingles

Filed: February 4, 2000

Group Art Unit: 2141

For: COMPUTER NETWORK SCANNING

Date: March 17, 2009

THE COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 22	MINUS	** 25	= 0	x \$26 \$52	- 0 -
INDEP. CLAIMS	* 4	MINUS	*** 7	= 0	x \$110 \$220	- 0 -
Fee for Multiple Dependent claims \$195°/\$390						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						- 0 -

- \* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

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Michael K. O'Neill, Reg. No. 32,622  
(Name of Attorney for Applicant)


Signature

March 17, 2009  
Date of Signature

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- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$\_\_\_\_\_ is enclosed.
- ☐ Charge \$\_\_\_\_\_ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$\_\_\_\_\_ to cover the fee for a \_\_\_\_\_ month extension is enclosed.
- ☐ A check in the amount of \$\_\_\_\_\_ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,

  
Attorney for Applicant  
Michael K. O'Neill  
Registration No.: 32,622

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03650.000140

PATENT APPLICATION

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: )  
: Examiner: K. Shingles  
SAEED ANOOSH FAR )  
: Group Art Unit: 2141  
Application No.: 09/498,396 )  
: Filed: February 4, 2000 )  
: For: COMPUTER NETWORK )  
SCANNING : March 17, 2009

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

AMENDMENT  
AND  
STATEMENT SUMMARIZING INTERVIEW

Sir:

In response to the Office Action dated December 24, 2008, please amend  
the above-identified application, as follows:

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the U.S. Patent and Trademark Office on:

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Michael K. O'Neill, Reg. No. 32,622  
(Name of Attorney for Applicant)

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